Application Form for Planetary Health Center of Expertise Planetary Health International Student Ambassador Program 2018

Eligibility Requirements

- 1. Full-time graduate or undergraduate student attending a UC campus on a student VISA
- 2. Citizenship in any African country
- Interested in designing and implementing a Planetary Health (PH) project in summer 2018: either in home country/region (if student already has travel support) OR in the USA (if student does not have travel support)
- 4. Already has a plan, or is interested in developing one, to make a contribution to PH in Africa.
- 5. Willing to help identify individual PH experts and relevant PH projects in home country/region
- 6. Willing to reach out to individual PH experts and relevant PH projects on student's home UC campus
- 7. Must attend two in-person workshops (April 20-22 in San Diego) & a 2-day workshop in early Fall 2018 (includes travel support for both workshops)

Recommended but not required: Enrollment in the online multi-campus course "Global Population, Health, and Government" (VME 057V) for spring 2018

Send completed application to planetaryhealth@ucdavis.edu by March 8, 2018 at 5pm PT

Directions to complete the application:

- 1. Please type your responses in the spaces provided or check the appropriate box(es) for each question.
- 2. Submit completed application (Sections A-G) to: planetaryhealth@ucdavis.edu by **5pm PT**, Thursday
 March 8. Incomplete or late applications will not be considered.
- 3. When submitting your application, use this subject line: Last name / First name / Country of Residence in Africa / ISA

A. PERSONAL INFORMATION

| 1. Last Name(s) | 7. Mobile number | + |
|--|----------------------------|---|
| 2. First Name(s) | 8. Additional phone number | + |
| 3. Gender (M/F/Other) | 9. WhatsApp number | + |
| 4. Date of Birth (mm/dd/yyyy) | 10. Skype name | |
| 5. Citizen of: (list country/ies) | 11. Email Address | |
| 6. <u>Country of</u> <u>Residence</u> in Africa | | |

B. ACADEMIC AFFILIATION AND INTERESTS

| Level at University (Undergraduate or Graduate level) | 4. School or Department on UC campus | |
|---|---|--|
| 2. Year in University Program (Year 1, 2, 3 or 4) | 5. List <u>one</u> of your primary academic interests | |
| 3. Which UC Campus do you attend? | 6. Intended Area of Future Specialization | |

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| C. | FUTURE PLANS |
|----|--|
| 1. | Do you have a plan to return to Africa to work or conduct research during the summer of 2018? ☐ Yes, I have secured funding for my travel. ☐ Maybe (IF I secure funding, I wish to go) ☐ No |
| 2. | Do you have current plan to return to Africa to work or conduct research during the summer of 2019? Yes, I have secured funding for my travel. Maybe (IF I secure funding, I wish to go) No |
| | If you responded 'No' to questions 1 and 2, please skip to question 5. |
| 3. | If yes on question 1 or 2, to which country are you planning to go? |
| 4. | If yes on question 1 or 2, write your planned month of departure and month of return: |
| | a |
| 5. | If you are considering working or conducting research in Africa, but have no definitive plan, please list country and possible timing of trip: |
| | Country Time of year (Spring Summer Fall Winter) Year |
| 6. | In 1-2 sentences, what work or research do you intend to do when you are in Africa? |
| 7. | After graduation, do you plan to pursue further studies or to work in the USA? ☐ Yes Undecided ☐ No ☐ |
| | If you responded 'No' to question 7, please skip to Section D. If 'Undecided' on question 7, skip to question 9. |
| 8. | If you have a concrete plan for higher education or to work here in the USA, please explain in 1-2 sentences: |
| 9. | If you hope to stay in the USA, either for more schooling or to work, please explain in 1-2 sentences: |

D. EDUCATIONAL AND WORK EXPERIENCE

| EDUCATIONAL BACKGROUND | | | | |
|---|--------------------------|----------------|--------------|--|
| Directions: List any college or universities you attended prior to enrolling in the UC System | | | | |
| University / College | Principal Areas of Study | Diploma | Start Year - | |
| | | earned, if any | End Year | |
| | | | - | |
| | | | - | |
| | | | - | |

| WORK / VOLUNTEER EXPERIENCE | | | | | |
|-----------------------------|--|----------------|---------------------------------------|------------------|--|
| The most rec | The most recent position should be listed first. | | | | |
| Organization | Position | Start/End Year | List your two primary | Related to | |
| | | | responsibilities (5 words or less per | Planetary Health | |
| | | | responsibility) | (Y/N) | |
| | | - | 1. | | |
| | | | 2. | | |
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E. PERSONAL STATEMENT

Directions: Answer the following questions in a detailed but concise manner. This section of the application must **not** exceed two (2) pages; each answer is limited to 1200 characters not including spaces. Note: Please provide specific, concrete answers to these questions. Generalized answers will be less competitive.

| Why are you interested in this program? Be specific about the <u>concrete</u> benefits that participation in ISA could offer you. |
|--|
| |
| What skills do you need to help you contribute to planetary health in your region? (Cite no more than 5 skills maximum, listed in bullet points) |
| |
| 3. Give one specific example of how you have demonstrated leadership in your life. |
| |
| 4. What is your vision for planetary health in your home town/region/country in Africa? |
| |

| | 5. | Describe two initial steps you plan to take towards realizing your vision of planetary health in your home town/region/country? Mention desired collaborators, if any. Be specific. | |
|---|-----|---|--|
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| _ | DEI | EEDENCES | |

Please provide the names of three professional references (including title (Dr./Mr./Mrs./Ms.), first and last name. title or position, institutional affiliation, telephone number(s), and email address. We do not need letters of recommendation, only names and contact information for three professional references.

1.

2.

3.

G. HOW DID YOU HEAR ABOUT THIS PROGRAM?

| | Check (tick) the appropriate box(es) | Write the name of the specific person/listserv/website |
|--------------------------------|---|--|
| How did you hear about the ISA | ☐ 1. An email from the Planetary Health Center of Expertise | |
| program? | 2. A listserv | |
| | 3. A fellow student | |
| | ☐ 4. A UC faculty member | |
| | ☐ 5. Someone else | |
| | ☐ 6. A posted flyer | |
| | 7. A website | |

Deadline: 5pm PT, Thursday March 8

Submit completed application to: planetaryhealth@ucdavis.edu

THANK YOU!